

# School-Located Vaccine Clinic – Planning and Policy Document

March 28, 2017

**Purpose:** To provide comprehensive guidance for planning and conducting school-located vaccine clinics (SLVC). All CDC recommended vaccines, except varicella and MMRV may be provided. This document is intended for use by Vermont Vaccine for Children (VFC) enrolled providers or Health Department District Offices planning to conduct a school-located vaccine clinic (SLVC). Information contained in this document must be used for all SLVCs using publicly supplied vaccine. Additional guidance will be provided to schools holding SLVC's when the Health Operations Center (HOC) is activated. The HOC is activated when there is a public health emergency.

**Definition:** SLVC are administered on school grounds, target all enrolled students and are held during school hours when parents are not present. SLVC often involve collaboration between public or independent schools, local primary care providers and the Health Department. VFC providers must adhere to the SLVC policy whenever vaccine is offered in a school setting.

**Background:** SLVC can offer benefits and challenges. Before proceeding with planning a clinic, it is necessary to review these documents to ensure this initiative is likely to reach intended outcomes.

Benefits: Schools are conveniently located throughout the community and can accommodate mass vaccination clinics, when indicated. School staff have access to parental contact information, which could facilitate communications (e.g.; announcing clinic dates, obtaining parental consent). School nurses, when present, may be available to assist with immunization activities and are often familiar with the health of individual students.

Challenges: SLVC could disrupt educational activities, if not carefully planned. Immunization activities may need to be tailored to each school, which can complicate planning efforts. Storage and handling of vaccine requires planning, training and equipment. Availability of clinic space and room for staff must be considered early in the planning process to minimize disruption to educational activities.

## School Requirements

Under normal circumstances, schools are not required to conduct SLVCs. When agreeing to a SLVC in collaboration with a local health care provider or Vermont Department of Health District Office (DO) staff, the school should identify a lead person who can participate in planning. This is usually the school nurse.

The school takes the lead in communicating all information about the clinic to parents and obtaining parent permission through signed consent forms. Parents who consent to vaccination must be provided with a Vaccine Information Statement (VIS) for the specific vaccine and have an opportunity to have their questions answered. The school nurse may answer vaccine specific questions or may refer parents to the entity conducting the clinic, if necessary. DO staff or the local healthcare provider should work with the school to develop appropriate and required communication information.

**Models:** There are two models that can be used to offer an SLVC in Vermont.

District Office led clinics must notify the Immunization Program when planning begins.

VFC Provider led clinics must notify the Immunization Program when planning begins or of any scheduled clinic dates and locations at [ahs.vdhimmunizationprogram@vermont.gov](mailto:ahs.vdhimmunizationprogram@vermont.gov)

A Staffing Guide is available in Appendix A

## **1. VFC Enrolled Provider SLVC**

A VFC Enrolled provider may offer a SLVC to address low immunization rates or access barriers.

### **Requirements (when using state-supplied vaccine)**

- ✓ Complete and submit a separate annual VFC Enrollment form (available upon request) for each school where immunizations will be administered to students.
- ✓ Any person administering vaccine must be covered under the medical license of the VFC provider-in-charge.
- ✓ Offer vaccine to all enrolled students.
- ✓ Order adequate vaccine and provide supplies. Influenza vaccine must be pre-booked for specific school(s) through the Immunization Program, annually in August. Influenza vaccine is only available for students who are younger than 19 years of age.
- ✓ Adhere to all VFC Storage and Handling requirements (see Appendix B).
- ✓ Students younger than 19 years of age must be screened and documented for VFC eligibility.
- ✓ All vaccinations must be entered in the Vermont Immunization Registry within 7 days of the clinic.
- ✓ The charge for administration of vaccine to any non-Medicaid VFC eligible student may not exceed \$21.22.
- ✓ A VAERS report must be completed for any adverse event.

## **2. VDH District Health Office SLVC**

VDH District Office sponsored school-based clinic may be held to address low immunization rates, access barriers or to provide flu vaccine in a specific region, if there is full support from the medical community or in the case of an epidemic or outbreak. Prior to planning a vaccine clinic, local health care providers, the school nurse and District Office staff must all agree on the necessity and timing. If there isn't agreement, other options to increase vaccination rates should be considered.

### **Requirements**

- ✓ Obtain approval from the Immunization Program prior to initiating clinic planning
- ✓ Work with the DO Public Health Specialist-Emergency Preparedness and the Director of Public Health Nursing when planning clinic set-up to include variables such as staffing, space, number of students, time available, cost, etc.
- ✓ The District Office completes a separate annual VFC Enrollment form (available upon request) for each school where immunizations will be administered to students
- ✓ Collaborate with the school to promote the clinic to parents and students

- ✓ Collaborate with the school to inform and communicate with community health care providers as needed
- ✓ Any person administering vaccine will work under standing orders written by the VFC provider-in-charge as determined on the enrollment form (Find standing orders at <http://www.immunize.org/standing-orders/>)
- ✓ Offer vaccine to all enrolled students
- ✓ Order an adequate vaccine supply
- ✓ Order and provide all clinic supplies
- ✓ Collaborate with the school lead to assure all forms (e.g.: screening, consent, release of information and VIS) are sent to parents and collected before the clinic
- ✓ Adhere to all VFC Storage and Handling requirements (see Appendix B)
- ✓ Students younger than 19 years of age must be screened and documentation of VFC eligibility must be completed
- ✓ All vaccinations must be entered in the Vermont Immunization Registry within 7 days of the clinic
- ✓ Review and be prepared to follow Health Department policies in case of an adverse event
- ✓ Report any adverse events and immunization errors to <https://vaers.hhs.gov/index>, and to the Immunization Program Manager

## **Appendix A: Staffing Considerations for a SLVC (for District Office)**

Staffing – Implementing SLVC may require staffing capacity that exceeds the District Office staff. Dependent on the clinic size, planners may need to consider recruiting additional staff, both medical and non-medical.

For a clinic to run smoothly, medical and non-medical staff must be assigned to various roles and responsibilities. For smaller clinics, medical staff may fulfill non-medical roles.

### **Non-medical staff roles:**

- Assemble and distribute vaccine and clinic information
- Assist with the promotion of clinics
- Communicate with school staff
- Receipt and review for completeness of required forms
- Organize and monitor clinic flow considering the school's schedule
- Assist with clinic flow as an escort or helper
- Verify the identity of each student to be vaccinated and assist in matching paperwork to students to ensure completeness of screening
- Track and enter vaccinations into the Vermont Immunization Registry

### **Medical staff roles:**

- Answer vaccine-specific parental questions
- Review Health Department immunization protocols and guidelines
- Verify that the dose is due by use of the Immunization Registry
- Before vaccinating, evaluate each child for contraindications to vaccination, such as illness
- Prepare and administer vaccines
- Document vaccination on forms that meet all requirements

## **Appendix B: Vaccine Storage and Handling**

### **Vaccine Management**

Refrigerated vaccines should be stored at temperatures between 2° C and 8° C at all times. Always store vaccines in their original packaging with boxtops closed until ready for administration. This protects them from light and provides additional thermal protection/stability. Following recommended guidelines and best practices for packing of vaccines during the off-site clinic will help prevent reduced vaccine potency or vaccine failure. For the safe transport and storage of vaccines, proper supplies are essential. Do not transport vaccine unless all conditions are met.

#### **Supplies needed:**

- Hard-sided insulated or Styrofoam container, labelled “VACCINE ONLY”
- Coolant materials: frozen 16.9- or 8-ounce water bottles that can be conditioned to 4° C to 5° C
- Insulating materials such as bubble wrap and corrugated cardboard—enough to form two layers per container
- Digital data logger thermometer for each container

**Do not use soft-sided coolers. Most commercially available soft-sided coolers are poorly insulated and likely to be affected by room or outdoor temperatures, and they can allow the vaccine to shift, coming into contact with coolants.**

### **Temperature Monitoring**

Vaccine must be transported to and from the scheduled clinic. At all times, the temperature must be monitored by a continuous monitoring and recording device (data logger) and documented. Upon arrival at the clinic site, vaccine must be stored to maintain appropriate temperatures throughout the clinic. Temperature data must be documented and reviewed every hour during the clinic day using the data logger and the Hourly Temperature Log. Vaccine may not be stored in a school located refrigerator.

### **Temperature Excursions**

Vaccine exposed to temperature excursions must be labeled “Do Not Use” until more information can be gathered from the Immunization Program and manufacturers on the usability of the vaccine. Contact the Immunization Program immediately at 1-800-640-4374.

## **Appendix B: Vaccine Storage and Handling Checklist for a SLVC**

### **Before the Clinic**

- Place the data logger glycol bottle in the refrigerator the night before clinic to get in range
- Package vaccine properly following Packaging Vaccines for Transport guide at <http://www.cdc.gov/vaccines/recs/storage/downloads/emergency-transport.pdf> and using conditioned frozen water bottles among other supplies

### **During the Clinic**

- Complete the top portion of the Hourly Vaccine Temperature Log
- Monitor the vaccine temperature using the data logger
- Review and document temperatures once every hour during the clinic day on the Hourly Vaccine Temperature Log
- If the temperature goes out of range, immediately contact the Immunization Program at 800-640-4374

### **After the Clinic**

- Return the vaccine to the refrigerator
- Record the time vaccine was returned to the refrigerator on the hourly temperature log
- Review the hourly temperature logs to verify that the vaccine cold chain has been maintained
- Fax the paper hourly temperature log to the IZ program at 802-863-7395 the day after the clinic
- Email the data logger download the day after the clinic to [ahs.vdhimmunizationprogram@vermont.gov](mailto:ahs.vdhimmunizationprogram@vermont.gov)